

STATE OF UTAH GOPB BUDGET IMPACT FORM FOR FEDERAL EDUCATION AGREEMENT

1) Grant Title:									
2) Federal Catalog Number:			3) State Tracking Identifier (STI#):				Official Use Only:		
4) Federal Funding Agency:					5) Grant Type (circle): New Reapplication Revision				
6) Description and Purpose of Federal Grant:									
7) Total Funding Sources									
(PLEASE PROVIDE EXPLANATION OF ALL MATCHES IN THE COMMENTS SECTION)									
			MATCHING STATE AND LOCAL DOLLARS						
State Fiscal Year	Annual Federal Award	Other Matching Funds from Non-State Entities	General/Uniform School Funds	Dedicated Credits	Restricted Funds	Local Tax Revenue	In-Kind (describe in #10)	Maintenance of Effort	Total Funds
FY 2009 Actual									
FY 2010 Authorized									
FY 2010 Supplemental									
FY 2011 Requested									
8) Will additional state monies be required to continue this program if this grant expires or is reduced? Yes No (if "Yes" explain in comments section or on a separate sheet)									
9) What federal requirements must the state meet as a condition of receiving monies and what impact will these requirements have on policy? (use separate sheet if needed)									
10) Comments:									
11) Address of the school district or charter:					12) Your Contact Information:				
					a) District:		d) Contact:		
					b) Charter:		e) Phone #:		
					c) School Name:		f) Email:		
13) School official needs to attach a cost estimate with this form.									